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NAME: Examiner J.D. Valentin Art Unit: 2877

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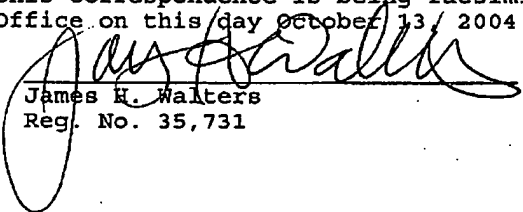
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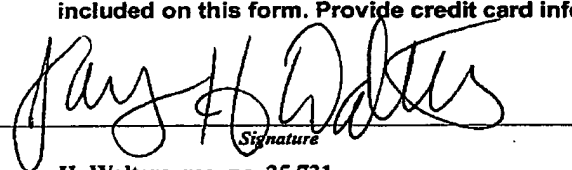
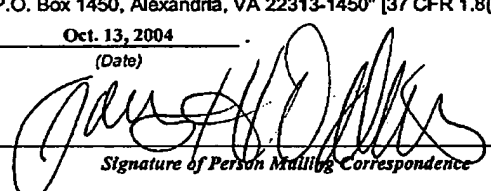
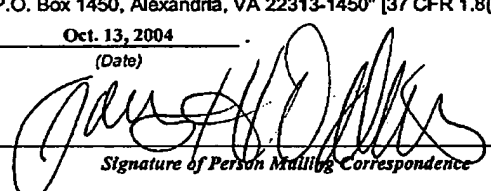
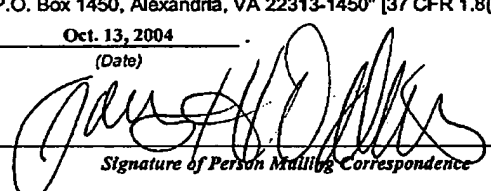
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Our ref: A-407 Your ref: 09/920,450

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I hereby certify that this correspondence is being facsimile transmitted
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James H. Walters
Reg. No. 35,731

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. A-407							
Applicant(s): Yasuhiro KOIZUMI et al												
Application No. 09/920,450	Filing Date 08/01/01	Examiner J.D. Valentin	Customer No. 802	Group Art Unit 2877	Confirmation No. 4861							
Invention: DEFECT INSPECTION APPARATUS FOR PHASE SHIFT MASK												
COMMISSIONER FOR PATENTS:					RECEIVED CENTRAL FAX CENTER OCT 13 2004							
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.												
CLAIMS AS AMENDED												
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE							
TOTAL CLAIMS	11 -	20 =	0 x	\$18.00	\$0.00							
INDEP. CLAIMS	3 -	3 =	0 x	\$88.00	\$0.00							
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00							
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 503036 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.												
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
 Signature James H. Walters reg. no. 35,731 Customer number 802 Dellett & Walters P.O. Box 2786 Portland, OR 97208-2786 US 503-224-01115			Dated: Oct. 13, 2004 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</td> </tr> <tr> <td style="text-align: center;">Oct. 13, 2004 (Date)</td> <td rowspan="2" style="text-align: center;">  Signature of Person Mailing Correspondence </td> </tr> <tr> <td colspan="2" style="text-align: center;"> James H. Walters Typed or Printed Name of Person Mailing Correspondence </td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on		Oct. 13, 2004 (Date)	 Signature of Person Mailing Correspondence	James H. Walters Typed or Printed Name of Person Mailing Correspondence	
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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of Confirmation No.: 4861
Yasuhiro KOIZUMI et al Art Unit: 2877
S. N. 09/920,450 Examiner: J.D. Valentin
Filed: August 1, 2001
For: DEFECT INSPECTION APPARATUS FOR PHASE SHIFT MASK

RESPONSE TO OFFICE ACTION

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Alexandria, VA 22313-1450

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Sir:

In response to the office action dated July 13, 2004, please
make the following amendments:

Claim amendments begin on page 2 of this document.

Remarks begin on page 6 of this document.